



FEE TRANSMITTAL

Docket No.	8594-001-64
Serial No.	09/453,509
Filing Date	December 3, 1999
Inventor(s)	Anthony Beverina, et al.
Group Art Unit	2123
Examiner	S. Broda

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OCT 25 2004

TOTAL AMOUNT OF PAYMENT \$490.00

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FEE CALCULATION (continued)

1. ☒ Applicant claims small entity status.
- ☒ Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442.
- ☐ Charge the indicated fees to Deposit Account No. 50-1442.

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge-late filing fee or oath	
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English Specification	
1251	110	2251	55	1-mo. ext. of time	
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
1252	430	2252	215	2-mo. ext. of time	
1253	980	2253	490	3-mo. ext. of time	490.00
1254	1530	2254	765	4-mo. ext. of time	
1255	2080	2255	1040	5-mo. ext. of time	
1401	340	2401	170	Notice of Appeal	
1402	340	2402	170	Appeal Brief	

SUBTOTAL (1) \$0.00

2. EXTRA CLAIM FEES

tot. claims	21	-	41*	=	0	x	\$9	=	0	1501	1370	2501	685	Utility/Reissue Issue Fee	
ind. claims	4	-	4*	=	0	x	\$44	=	0	1502	490	2502	245	Design Issue Fee	
<input type="checkbox"/>	Multiple Dependent Claims						\$150	=		1504	300	1504	300	Publication Fee	
Large Entity		Small Entity		Fee Description		Fee Code		Fee (\$)		Fee Code		Fee (\$)		Fee Description	
1202	18	2202	9	Claims in excess of 20		1806	180	1806	180	1806	180	1806	180	IDS Submission	
1201	88	2201	44	Independent claims in excess of 3		8021	40	8021	40	8021	40	8021	40	Assignment recordation	
1203	300	2203	150	Multiple dependent claim, if not paid		1801	790	2801	395	2801	395	2801	395	For Filing RCE	
1204	88	2204	44	*Reissue independent claims over original patent		1814	110	2814	55	2814	55	2814	55	Terminal Disclaimer	
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent		OTHER (indicate below):									

SUBTOTAL (2) \$0.00

* or number previously paid, if greater; For Reissues, see above

SUBTOTAL (3) \$490.00

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Signature		Date	October 20, 2004
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DOCKET NO.: 8594-001-64

ASSISTANT COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA, VA 22313-1450

Re: Serial No.: 09/453,509
Applicant(s): Anthony BEVERINA, et al.
Filing Date: December 3, 1999
For: METHOD AND APPARATUS FOR RISK MANAGEMENT
Group Art Unit: 2123
Examiner: S. Broda

SIR:

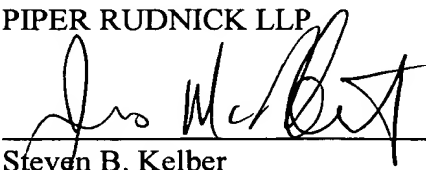
Attached hereto for filing are the following papers:

Fee Transmittal
Request for Extension of Time (3 Months)
Amendment
Cited Documents (2)

Our check in the amount of \$ 490.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, including any fees required under 37 C.F.R. 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 50-1442. Further, if these papers are not considered timely filed, then a request is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

PIPER RUDNICK LLP



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